

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		6-8-00
O.I.P.E. CLASSIFIER		8	6-14-00
FORMALITY REVIEW	F.H.	GC 856	07-27-00
RESPONSE FORMALITY REVIEW	L.H.	120125	9-6-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here